	DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH CHILD CARE FACILITY								
	7				PECTION REPORT				
REASON Regular Follow-Up		<b>V</b>	GRADE	Inspection Date:  Ob O( 2018  Time In/Out:	OWNER/OPERATOR:			CARE CENTER	
Complair Investiga Other:	_		RATING	Sanitary Permit No.:	TAMUNING	Establishi	ment Type:		
	П			20000 160000677			mporary	Expired	
The f	ollow	ing ite	ms identify as the Dep	artment indicates. Nor equest for hearing mus	Child Care License: No.: 180200 / May in the operations and facilities which compliance may result in downgrad at be submitted before the indicated compliance.	h must b	e corrected rmit suspen date.	by the next sion. To appeal	
11 -101	AN	143	15.41				DEWERIT	CORRECTBY	
	TH			were obser	CTION WAS CONDUTED TO TO DAY:	TODAY.			
21.	НО	T A	HD CO	UD WATER NO	OF PROVIDED IN GIRL'S		6	08/16/18	
	RESTROOM: HOT WATER NOT PROVIDED IN BOY'S								
		T 1201	om.	RUMA HAG					
	HOT AND LOLD WATER SHALL BE PROVIDED IN HAMOWASHING SINKS THROUGHOUT THE PACILITY TO								
	FA	<u>uvm</u>	ATE W	MA PROPEZ	HANDWASHING HYGIBNE.			10161	
	PHOTOS WERE TAKEN POSTED PLACAZO "A" NO. 02764 ON WHOOD FWAITI								
							g apea.	THE COL	
	DISCUSSED THIS REPORT WITH TO JORDAN OWNER.						EI		
			_						
l hav	e re	ad and	d underete	nd the above violetic	an(e) and I am aware of the server	ative			
*Note: cited a	Whabova 10	en an e, the days	y of the fol y shall be of this ins	lowing items are corrected within	Received By (Name & Title):  Condan  DEH Inspector (Name & Title):  V. PAN MUNICO BEHD	250	KyCieh		